PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
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Under the Pap	respond to a collection of informellon unless it displeys a valid OMB control number.						
	Complete if Known Application Number 09/843,875-Conf. #1199						
Fees pursuant to th				ont. #1198	'		
FEE			April 30, 2001				
For FY 2008					Kazumi TABU	CHI	
П							
Applicant claims smell entity status. See 37 CFR 1.27			Art Unit 2625 Attorney Docket No. 1152-0275P				
TOTAL AMOUNT OF PAYMENT (\$) 810.00			Attorney Docker	Attorney Docket No. 1152-0275P			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
Credit any overpayments Credit any overpayments Credit any overpayments							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FIL		ARCH FEES	EXAMI	NATION FEES		
Application Typ	oe Fee (\$)	Small Entity Fee (\$) Fee (Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)
Utility	310	155 510		210	105		
Design	210	105 100	50	130	65		
Plant	210	105 310	155	160	80		
Reissue	310	155 510	255	620	310		
Provisional	210	105 0	0	0	0		
2. EXCESS CLAIM FEES							
Fee Description Each claim over 20 (including Reissues)							Fee (\$)
Each independent claim over 3 (including Reissues)						50	25
Multiple dependent claims						210 370	105
Multiple dependent claims 370 185 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims							
20 .	ratu (4)		Fee (\$) Fee Paid (\$)				
ZU - 20 = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater then 20.							
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
1 -3 = X = =							
HP = highest number of independent cleims peid for, if greater then 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S. C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00							
SUBMITTED BY	7,	21					
Signature	<u>Ala</u>	5 (reg # 40,417)	Registration No. (Attorney/Agent)	29,271	Telephone	(703) 20	5-8000
Neme (Print/Type)			Dete	October 2	6, 2007		
7	Ev.						

Birch, Stewart, Kolasch & Birch, LLP CG/MH/lps